

Sexual risk behaviours among HIV-infected South Africans: couples-based prevention

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This cross-sectional study examined whether sexual risk taking behaviours were impacted by knowledge of partner HIV status among HIV-infected South Africans enrolled in a primary care program. The study assessed four self-reported sexual risk behaviours as outcomes, namely current partner HIV status, reporting >2 sex acts in the last 2 weeks, reporting unprotected sex in the last 6 months, and having >1 sex partner in the last 6 months.

In light of expanding access to antiretroviral therapy (ART) and increasing calls for utilizing treatment as prevention in resource-limited settings, understanding sexual risk behaviours among HIV-infected individuals and their sex partners is necessary to inform secondary prevention interventions and to better understand the potential HIV transmission implications of greater access to ART and care. Reframing HIV prevention as a couples-centred approach could enhance prevention efforts currently underway in sub-Saharan Africa. This study answered the important question of whether differential behavioural patterns by partner HIV status occurs in the primarily heterosexual HIV epidemic of southern Africa.

We found that 40% of our sample of HIV-infected South African men and women in an urban primary care program reported having sex with an HIV-positive partner, 40% with a partner of unknown HIV status, and 20% with a HIV-negative partner. Those who reported having a HIV-negative or status unknown partner were more likely to be women and ART-naïve. Individuals with an HIV-infected partner were only slightly more likely to engage in sexual risk behaviours, though this was not statistically significant. Notably, sexual risk behaviours persisted

among those participants who reported having a HIV-negative or status unknown partner.

These data suggest that selectively engaging in sexual risk behaviours by partner HIV status does not appear to be extensively practiced in this setting where most HIV transmission is heterosexual, which is different than data from the developed world among some high-risk groups. Given the large proportion of participants who remained unaware of their partners HIV status, further interventions like partner voluntary counselling and testing (VCT) and effective counselling messages for serodiscordant couples are needed to support testing the partners of HIV-infected individuals in care. HIV care and treatment programs need to expand couples- and family-based VCT services so that more HIV-infected Africans know their partners' HIV status, which could have an impact on HIV transmission risk behaviours.

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Reference:

Venkatesh KK, de Bruyn G, Lurie MN et al. Sexual Risk Behaviors Among HIV-Infected South African Men and Women with Their Partners in a Primary Care Program: Implications for Couples-Based Prevention. *AIDS Behav.* 2011 Apr 8. [Epub ahead of print]